

**Durham City/County Planning
Zoning Map Change Application**

Submittal Date:				Case Number:			
Requested Zone(s): (include overlay)				Existing Zone(s): (include overlay)			
PIN(s):				Total Site Area:			
Street Address or Frontage:				Jurisdiction: <input type="checkbox"/> County (check one) <input type="checkbox"/> City <input type="checkbox"/> City and County			
Project Name:							
Comprehensive Plan: (Tier) (Land Use Designation)							
Summary of Proposed Development (types of uses, number and type of residential units, square footage in non-residential buildings, etc): 							
Applicant							
Contact Name AND Business Name if applicable:						_____ Applicant Signature	
Address:							
City:				State:		Zip Code:	
Phone:			Fax:			Email:	
Agent (if any)							
Contact Name AND Business Name if applicable:						_____ Agent Signature	
Address:							
City:			State:		Zip Code:		
Phone:			Fax:			Email:	
Property Owner(s) (Attach a separate sheet if more space is necessary)							
Name:						Phone:	
Address:						Fax:	
City:			State:		Zip Code:		
Email:							
Name:						Phone:	
Address:						Fax:	
City:			State:		Zip Code:		
Email:							
Name:						Phone:	
Address:						Fax:	
City:			State:		Zip Code:		
Email:							

Contacts		
Development Plan prepared by:	Phone:	
	Email:	
Stormwater Impact Analysis prepared by:	Phone:	
	Email:	
Traffic Impact Analysis prepared by:	Phone:	
	Email:	
Building Design Guidelines/Elevations prepared by:	Phone:	
	Email:	
Resource Features Analysis prepared by:	Phone:	
	Email:	
Application Checklist		
<p>Each item on the following submittal checklist is to be initialed by the Applicant and/or the Agent, indicating that:</p> <ul style="list-style-type: none"> the item is part of the submittal package; the item is complete; and the information is accurate <p>A submittal package with items not initialed, or otherwise incomplete or inaccurate, <u>will not be accepted</u>. An application shall be considered to have been accepted for review only after it has been determined to be complete in accordance with Section 3.2.4 of the Unified Development Ordinance, not upon submission to the Planning Department.</p> <p>I, the undersigned, acknowledge that the application is complete and that all information included is accurate to the best of my knowledge:</p> <div style="display: flex; justify-content: space-between;"> <div>_____ Signature</div> <div>_____ Date</div> <div>_____ Printed Name</div> </div>		
APPLICATION ITEM	APPLICANT/AGENT INITIAL	STAFF ACCEPTANCE
1. Application		
2. Owner's Acknowledgement Form for each parcel– must include original signature for all owners of record Forms included: (#)_____		
3. Pre-Submittal Conference form		
4. Boundary Map of Area		
5. Legal Description		

If submitting with a development plan items 6 – 10 apply:		
6. Development Plan Checklist		
7. 12 Sets of Full Size Plans		
8. Legible Plan Reduction (11" X 17")		
9. Stormwater Checklist, 2 copies or memo from City or County Stormwater Management		
10. Traffic Impact Analysis, 3 copies -or- a memo from the City Transportation Division stating a TIA is not required.		
If applicable:		
12. Copy of Annexation Request Transmittal (if applicable; it must be filed prior to the zoning map change submittal)		
13. Has a Land Use Plan Amendment been filed? If so, case # _____ (to be completed at time of submittal)		
14. Neighborhood Meeting Materials (sign-up sheet from the meeting, summary of the issues raised, description of how the proposal addresses the issues, copy of meeting notification, list of those notified, copies of materials distributed)		
For all applications:		
15. Filing Fee: \$		